



County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH HAZARDOUS MATERIALS DIVISION

P.O. BOX 129261, SAN DIEGO, CA 92112-9261
(858) 505-6880 FAX (858) 505-6848
<http://www.sdcdeh.org>

TO: Underground Storage Tank Owners and Operators

FROM: Hazardous Materials Division

SUBJECT: UNDERGROUND STORAGE TANK MONITORING PROCEDURES,
EMERGENCY RESPONSE PLAN, AND PLOT PLAN - MODEL FORMS

Underground Storage Tank (UST) owners and operators are required to maintain written monitoring procedures and emergency response plans. This regulation applies to single-walled and double-walled underground storage tank systems. [Authority Cited: California Code of Regulations, Title 23, Sections 2632(d) and 2641(h)].

Attached are "blank" forms for your use to comply with the regulations. Please complete the attached forms and sign/date them. State regulations require you to maintain a completed copy of these forms at the underground storage tank site. We strongly recommend you post the UST monitoring and emergency response plans in a conspicuous location at your facility.

County Inspectors will review the monitoring procedures and plans with tank operators during inspections to verify that copies are maintained at the facility and that operators remain familiar with them.

If you should have any questions, please contact the Hazardous Materials Division, Duty Specialist at (858) 505-6880.

Attachments: (3)

"Environmental and public health through leadership, partnership and science"

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UNDERGROUND STORAGE TANK
MONITORING PLAN (Page 1 of 2)

TYPE OF ACTION		<input type="checkbox"/> 1. NEW PLAN	<input type="checkbox"/> 2. CHANGE OF INFORMATION	490-1
PLAN TYPE		<input type="checkbox"/> 1. MONITORING IS IDENTICAL FOR ALL USTs AT THIS FACILITY.		490-2
(Check one item only)		<input type="checkbox"/> 2. THIS PLAN COVERS ONLY THE FOLLOWING UST SYSTEM(S)(specify):		
I. FACILITY INFORMATION				
BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As)		FACILITY ID #		1
		3 7 0 0 0		
BUSINESS SITE ADDRESS		CITY	CA	ZIP CODE
II. EQUIPMENT TESTING AND PREVENTIVE MAINTENANCE				
Testing, preventive maintenance, and calibration of monitoring equipment (e.g., sensors, probes, line leak detectors, etc.) must be performed at the frequency specified by the equipment manufacturers' instructions, or annually, whichever is more frequent, and that such work must be performed by qualified personnel. (23 CCR §2632, 2634, 2638, 2641)				
MONITORING EQUIPMENT IS SERVICED		<input type="checkbox"/> 1. ANNUALLY	<input type="checkbox"/> 99. OTHER (Specify):	490-3a 490-3b
III. MONITORING LOCATIONS				
<input type="checkbox"/> 1. NEW SITE PLOT PLAN/MAP SUBMITTED WITH THIS PLAN.		490-4		
<input type="checkbox"/> 2. SITE PLOT PLAN/MAP PREVIOUSLY SUBMITTED. (23 CCR §2632, 2634)				
IV. TANK MONITORING IS PERFORMED USING THE FOLLOWING METHOD(S):				
<input type="checkbox"/> 1. CONTINUOUS ELECTRONIC TANK MONITORING OF ANNULAR (INTERSTITIAL) SPACE(S) OR SECONDARY CONTAINMENT VAULT(S) WITH AUDIBLE AND VISUAL ALARMS (23 CCR §2632, 2634)		490-5		
SECONDARY CONTAINMENT IS:		<input type="checkbox"/> a. DRY	<input type="checkbox"/> b. LIQUID FILLED	<input type="checkbox"/> c. PRESSURIZED
				<input type="checkbox"/> d. UNDER VACUUM
PANEL MANUFACTURER:		MODEL #:		490-7 490-8
LEAK SENSOR MANUFACTURER:		MODEL #(S):		490-9 490-10
<input type="checkbox"/> 2. AUTOMATIC TANK GAUGING (ATG) SYSTEM USED TO MONITOR SINGLE WALL TANK(S) (23 CCR §2643)		490-11		
PANEL MANUFACTURER:		MODEL #:		490-12 490-13
IN-TANK PROBE MANUFACTURER:		MODEL #(S):		490-14 490-15
LEAK TEST FREQUENCY:		<input type="checkbox"/> a. CONTINUOUS	<input type="checkbox"/> b. DAILY/NIGHTLY	<input type="checkbox"/> c. WEEKLY
		<input type="checkbox"/> d. MONTHLY	<input type="checkbox"/> e. OTHER (Specify):	490-16 490-17
PROGRAMMED TESTS:		<input type="checkbox"/> a. 0.1 g.p.h.	<input type="checkbox"/> b. 0.2 g.p.h.	<input type="checkbox"/> c. OTHER (Specify):
				490-18 490-19
<input type="checkbox"/> 3. MONTHLY STATISTICAL INVENTORY RECONCILIATION (23 CCR §2646.1)		490-20		
<input type="checkbox"/> 4. WEEKLY MANUAL TANK GAUGING (MTG) (23 CCR §2645):		TESTING PERIOD:	<input type="checkbox"/> a. 36 HOURS	<input type="checkbox"/> b. 60 HOURS
				490-21 490-22
<input type="checkbox"/> 5. TANK INTEGRITY TESTING (23 CCR §2643.1):		490-23		
TEST FREQUENCY:		<input type="checkbox"/> a. ANNUALLY	<input type="checkbox"/> b. BIENNIALY	<input type="checkbox"/> c. OTHER (Specify):
				490-24, 490-25
<input type="checkbox"/> 99. OTHER (Specify):		490-26, 490-27		
V. PIPE MONITORING IS PERFORMED USING THE FOLLOWING METHOD(S) (Check all that apply)				
<input type="checkbox"/> 1. CONTINUOUS MONITORING OF PIPE/ PIPING SUMP(S) AND OTHER SECONDARY CONTAINMENT WITH AUDIBLE AND VISUAL ALARMS (23 CCR §2636)		490-28		
SECONDARY CONTAINMENT IS:		<input type="checkbox"/> a. DRY	<input type="checkbox"/> b. LIQUID FILLED	<input type="checkbox"/> c. PRESSURIZED
				<input type="checkbox"/> d. UNDER VACUUM
PANEL MANUFACTURER:		MODEL #:		490-30 490-31
LEAK SENSOR MANUFACTURER:		MODEL #(S):		490-32 490-33
PIPING LEAK ALARM TRIGGERS AUTOMATIC PUMP (i.e., TURBINE) SHUTDOWN.		<input type="checkbox"/> a. YES		<input type="checkbox"/> b. NO
FAILURE/DISCONNECTION OF THE MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN.		<input type="checkbox"/> a. YES		<input type="checkbox"/> b. NO
				490-34 490-35
<input type="checkbox"/> 2. MECHANICAL LINE LEAK DETECTOR (MLLD) THAT ROUTINELY PERFORMS 3.0 g.p.h. LEAK TESTS AND RESTRICTS OR SHUTS OFF PRODUCT FLOW WHEN A LEAK IS DETECTED (23 CCR §2636)		490-36		
MLLD MANUFACTURER(S):		MODEL #(S):		490-37 490-38
<input type="checkbox"/> 3. ELECTRONIC LINE LEAK DETECTOR (ELLD) THAT ROUTINELY PERFORMS 3.0 g.p.h. LEAK TESTS (23 CCR §2636)		490-39		
ELLD MANUFACTURER(S):		MODEL #(S):		490-40 490-41
PROGRAMMED IN LINE LEAK TEST:		<input type="checkbox"/> 1. MINIMUM MONTHLY 0.2 g.p.h.	<input type="checkbox"/> 2. MINIMUM ANNUAL 0.1 g.p.h.	490-42
ELLD DETECTION OF A PIPING LEAK TRIGGERS AUTOMATIC PUMP (i.e., TURBINE) SHUTDOWN.		<input type="checkbox"/> a. YES		<input type="checkbox"/> b. NO
ELLD FAILURE/DISCONNECTION TRIGGERS AUTOMATIC PUMP (i.e., TURBINE) SHUTDOWN.		<input type="checkbox"/> a. YES		<input type="checkbox"/> b. NO
				490-43 490-44
<input type="checkbox"/> 4. PIPE INTEGRITY TESTING: TEST FREQUENCY		<input type="checkbox"/> a. ANNUALLY	<input type="checkbox"/> b. EVERY 3 YEARS	<input type="checkbox"/> c. OTHER (Specify):
				490-46, 490-47
<input type="checkbox"/> 5. VISUAL PIPE MONITORING: FREQUENCY		<input type="checkbox"/> a. DAILY	<input type="checkbox"/> b. WEEKLY	<input type="checkbox"/> c. MIN. MONTHLY & EACH TIME SYSTEM OPERATED*
				490-48, 490-49
		* Allowed for monitoring of unburied emergency generator fuel piping only per HSC §25281.5(b)(3)		
<input type="checkbox"/> 6. SUCTION PIPING MEETS EXEMPTION CRITERIA [23 CCR §2636(a)(3)]		490-50		
<input type="checkbox"/> 7. NO REGULATED PIPING PER HEALTH AND SAFETY CODE, DIVISION 20, CHAPTER 6.7 IS CONNECTED TO THE TANK SYSTEM		490-51		
<input type="checkbox"/> 99. OTHER (Specify):		490-52, 490-53		

UST Monitoring Plan – Page 1 Instructions

Complete a separate UST Monitoring Plan for each UST monitoring system at the facility. This Monitoring Plan must be kept at the UST location at all times. The elements of this Monitoring Plan constitute conditions of the UST Operating Permit. This form must be submitted with your initial UST Operating Permit Application and within 30 days of changes in the information it contains. Please note that you are required to obtain approval prior to installing or modifying monitoring equipment. (Note: Numbering of these instructions follows the data element numbers on the form.)

- 490-1. TYPE OF ACTION – Check the appropriate box to indicate why this plan is being submitted.
- 490-2. PLAN TYPE – Check the appropriate box to indicate whether this plan covers all, or merely some, of the USTs at the facility. If the plan covers only some of the tanks, identify those tanks in the space provided [e.g., by using the Tank ID #(s) in item 432 of the UST Operating Permit Application – Tank Information Form(s)].
 - 1. FACILITY ID NUMBER – This space is for agency use only and is the same as UPF (Unified Program facility) Permit #.
 - 3. BUSINESS NAME – Enter the complete Facility Name.
- 103. BUSINESS SITE ADDRESS – Enter the street address where the facility is located, including building number, if applicable. Post office box numbers are not acceptable. This information must provide a means to locate the facility geographically.
- 104. CITY – Enter the city or unincorporated area in which the facility is located.
- 105. ZIP CODE – Enter the zip code of the UST site. The zip+4 may also be added.
- 490-3a. MONITORING EQUIPMENT IS SERVICED – Check the appropriate box to specify the frequency of monitoring equipment testing/certification.
- 490-3b. Specify Other frequency for monitoring equipment servicing.
- 490-4. SITE PLAN - Indicate if a site plan/map is submitted with this monitoring plan or if it was submitted previously and is current for the facility. Monitoring plans must include a Site Plot Plan/Map showing the tank and piping layouts and the locations where monitoring is performed (i.e., location of sensors, probes, line leak detectors, monitoring system control panel, etc.).
- 490-5. IV-1 CONTINUOUS ELECTRONIC MONITORING-Indicate if this monitoring method is being used to monitor the tanks.
- 490-6. SECONDARY CONTAINMENT– If IV-1 is checked, check the appropriate box to describe the environment inside the tank secondary containment.
- 490-7. PANEL MANUFACTURER – If IV-1 is checked, enter the name of the manufacturer of the monitoring system control panel (console).
- 490-8. MODEL # – If IV-1 is checked, enter the model number for the monitoring system control panel.
- 490-9. LEAK SENSOR MANUFACTURER – If IV-1 is checked, enter the name of the manufacturer of the sensor(s). If additional space is needed, use Section X.
- 490-10. MODEL #(S) – If IV-1 is checked, enter the model number for each type of sensor installed. If additional space is needed, use Section X.
- 490-11. IV-2 AUTOMATIC TANK GAUGING-Indicate if this method is used for monitoring the UST's.
- 490-12. PANEL MANUFACTURER – If IV-2 is checked, enter the name of the manufacturer of the monitoring system control panel (console).
- 490-13. MODEL # – If IV-2 is checked, enter the model number for the monitoring system control panel.
- 490-14. IN-TANK PROBE MANUFACTURER – If IV-2 is checked, enter the name of the manufacturer of the probe(s).
- 490-15. MODEL #(S) – If IV-2 is checked, enter the model number for each type of in-tank probe installed. If additional space is needed, use Section X.
- 490-16. LEAK TEST FREQUENCY – If IV-2 is checked, check the appropriate box to describe the in-tank leak test frequency.
- 490-17. SPECIFY – If 490-16e is checked, enter the frequency of programmed leak tests.
- 490-18. PROGRAMMED TESTS – If IV-2 is checked, check the appropriate box to describe the tests programmed into the ATG system.
- 490-19. SPECIFY – If 490-18c is checked, enter the frequency of in-tank leak testing.
- 490-20. IV-3 INVENTORY RECONCILIATION – Check the box if statistical inventory reconciliation is performed.
- 490-21. IV-4 WEEKLY MANUAL TANK GAUGING – Indicate if this method is used to monitor the tanks.
- 490-22. TESTING PERIOD – If IV-4 is checked, check the appropriate box to describe the MTG testing period.
- 490-23. IV-5 TANK INTEGRITY TESTING: Indicate if this method is used to monitor the tanks.
- 490-24. TEST FREQUENCY – If IV-5 is checked, check the appropriate box to describe the frequency of tank integrity testing.
- 490-25. OTHER: If 490-24c is checked, specify other test frequency.
- 490-26. IV-99 OTHER: Indicate if monitoring of the tanks occurs that is not indicated in any other category.
- 490-27. If IV-99 is checked, enter a brief description of the other tank monitoring method(s) used (e.g., vadose zone monitoring per 23 CCR §2647, groundwater monitoring per 23CCR §2648). Include the monitoring frequency (e.g., Continuous, Weekly). If additional space is needed, use Section X.
- 490-28. V-1 CONTINUOUS MONITORING OF PIPE/PIPING SUMP(S) AND OTHER SECONDARY CONTAINMENT WITH AUDIBLE AND VISUAL ALARMS: Indicate if this is the monitoring method used for the piping.
- 490-29. SECONDARY CONTAINMENT: If V-1 is checked, Check the appropriate box to describe the environment inside piping secondary containment.
- 490-30. PANEL MANUFACTURER – If V-1 is checked, enter the name of the manufacturer of the monitoring system control panel (console).
- 490-31. MODEL # – If V-1 is checked, enter the model number for the monitoring system control panel.
- 490-32. LEAK SENSOR MANUFACTURER – If V-1 is checked, enter the name of the manufacturer of the sensor(s).
- 490-33. MODEL #(S) – If V-1 is checked, enter the model number for each type of sensor installed. If additional space is needed, use Section X.
- 490-34. PIPING LEAK ALARM T RIGGERS AUTOMATIC PUMP SHUTDOWN – If V-1 is checked, check Yes or No.
- 490-35. FAILURE/DISCONNECTION OF THE MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN – If V-1 is checked, check Yes or No.
- 490-36. V-2 PIPE MECHANICAL LINE LEAK DETECTORS PERFORM 3 GPH LEAK TESTS: Indicate if this monitoring method is used to monitor the pipelines.
- 490-37. MLLD MANUFACTURER(S) – If V-2 is checked, enter the name(s) of the manufacturer(s) of the mechanical line leak detector(s). If additional space is needed, use Section X.
- 490-38. MODEL #(s) - If V-2 is checked, Enter the model number for each type of mechanical line leak detector installed. If additional space is needed, use Section X.
- 490-39. V-3 PIPE ELECTRONIC LINE LEAK DETECTORS: Indicate if this monitoring method is used to monitor the pipelines.
- 490-40. ELLD MANUFACTURER – If V-3 is checked, Enter the name of the manufacturer of the electronic line leak detector(s).
- 490-41. MODEL #(S)n - If V-3 is checked, enter the model number for each type of electronic line leak detector installed. If additional space is needed, use Section X.
- 490-42. PROGRAMMED LINE INTEGRITY TESTS –If V-3 is checked, check the appropriate box to describe the type of tests programmed into the monitoring system.
- 490-43. ELLD DETECTION OF A PIPING LEAK ALARM TRIGGERS PUMP SHUTDOWN – If V-1 is checked, check Yes or No.
- 490-44. ELLD DETECTION OF A PIPING LEAK FAILURE/DISCONNECTION TRIGGERS PUMP SHUTDOWN. – If V-1 is checked, check Yes or No.
- 490-45. V-4 PIPE INTEGRITY TESTING - Indicate if this monitoring method is used to monitor the pipelines.
- 490-46. TEST FREQUENCY – If V-4 is checked, check the appropriate box to describe the frequency of pipe integrity testing.
- 490-47. SPECIFY – If 490-46-99 is checked, enter the frequency of pipe integrity testing.
- 490-48. V-5 VISUAL PIPE MONITORING - Indicate if this monitoring method is used to monitor the pipelines.
- 490-49. If V-5 is checked, check the appropriate box to describe the frequency of visual monitoring.
- 490-50. SUCTION PIPING MEETS EXEMPTION CRITERIA - Indicate if this monitoring method is used to monitor the pipelines.
- 490-51. NO REGULATED PIPING PER HEALTH AND SAFETY CODE, DIVISION 20, CHAPTER 6.7 IS CONNECTED TO THE TANK SYSTEM - Check this box if no piping in the tank system is regulated under the UST law, or there is no piping.
- 490-52. V-99 OTHER - Indicate if another method is used for pipeline monitoring.
- 490-53. SPECIFY – Enter a brief description of the other line monitoring method(s) used. If additional space is needed, see Section X. Be sure to clearly describe monitoring method(s) and frequency.

This monitoring plan must include a Site Plan showing the general tank and piping layouts and the locations where monitoring is performed (i.e., location of each sensor, line leak detector, monitoring system control panel, etc.). If you already have a diagram (e.g., current UST Monitoring Site Plan from a Monitoring System Certification form, Hazardous Materials Business Plan map, etc.) that shows all required information, include it with this plan.



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UNDERGROUND STORAGE TANK
MONITORING PLAN (Page 2 of 2)

This plan has been reviewed and is:
☐ Approved ☐ Approved with conditions*
Date: _____ / _____ / _____
Specialist: _____
(Local Agency Signature) *conditions on back

VI. UNDER DISPENSER CONTAINMENT (UDC) MONITORING

1. UDC MONITORING IS PERFORMED USING THE FOLLOWING METHOD:		490-54a
<input type="checkbox"/> 1. CONTINUOUS ELECTRONIC MONITORING	<input type="checkbox"/> 2. FLOAT AND CHAIN ASSEMBLY	490-54b
<input type="checkbox"/> 4. NO DISPENSERS	<input type="checkbox"/> 99. OTHER (Specify):	
PANEL MANUFACTURER: _____		490-55
MODEL #: _____		490-56
LEAK SENSOR MANUFACTURER: _____		490-57
MODEL #(S): _____		490-58
DETECTION OF A LEAK INTO THE UDC TRIGGERS AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO 490-59
UDC LEAK ALARM TRIGGERS AUTOMATIC PUMP SHUTDOWN		<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO 490-60
FAILURE / DISCONNECTION OF UDC MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN		<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO 490-61
UDC MONITORING STOPS THE FLOW OF PRODUCT AT THE DISPENSER		<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO 490-62
2. UDC CONSTRUCTION IS <input type="checkbox"/> 1. SINGLE-WALLED <input type="checkbox"/> 2. DOUBLE-WALLED		490-63
IF DOUBLE WALLED:		490-64a
UDC INTERSTITIAL SPACE IS MONITORED BY: <input type="checkbox"/> 1. LIQUID <input type="checkbox"/> 2. PRESSURE <input type="checkbox"/> 3. VACUUM		
A LEAK WITHIN THE SECONDARY CONTAINMENT OF THE UDC TRIGGERS AUDIBLE AND VISUAL ALARMS <input type="checkbox"/> a. YES <input type="checkbox"/> b. NO		490-64b

VII. PERIODIC SYSTEM TESTING

<input type="checkbox"/> 1. ELD TESTING: THIS FACILITY HAS BEEN NOTIFIED BY THE STATE WATER RESOURCES CONTROL BOARD THAT ENHANCED LEAK DETECTION (ELD) MUST BE PERFORMED. PERIODIC ELD IS PERFORMED EVERY 36 MONTHS AS REQUIRED. (23 CCR §2644.1)	490-65
<input type="checkbox"/> 2. SECONDARY CONTAINMENT COMPONENTS ARE TESTED EVERY 36 MONTHS.	490-66
<input type="checkbox"/> 3. SPILL BUCKETS ARE TESTED ANNUALLY.	490-67

VIII. RECORDKEEPING

The following monitoring/maintenance records are kept for this facility:

<input type="checkbox"/> Alarm logs	490-68a	<input type="checkbox"/> Visual Inspection Records	490-68b
<input type="checkbox"/> Tank integrity testing results	490-68c	<input type="checkbox"/> SIR testing results (and supporting documentation records)	490-68d
<input type="checkbox"/> Tank gauging results (and supporting documentation records)	490-68e	<input type="checkbox"/> ATG Testing results (and supporting documentation records)	490-68f
<input type="checkbox"/> Corrosion Protection 60-day logs	490-68g	<input type="checkbox"/> Equipment maintenance and calibration records	490-68h

IX. TRAINING

<input type="checkbox"/> Personnel with UST monitoring responsibilities are familiar with all of the following documents relevant to their job duties.	490-69a
REFERENCE DOCUMENTS MAINTAINED AT FACILITY (Check all that apply)	
<input type="checkbox"/> THIS UNDERGROUND STORAGE TANK MONITORING PLAN (Required)	490-69b
<input type="checkbox"/> OPERATING MANUALS FOR ELECTRONIC MONITORING EQUIPMENT (Required)	490-69c
<input type="checkbox"/> CALIFORNIA UNDERGROUND STORAGE TANK REGULATIONS	490-69d
<input type="checkbox"/> CALIFORNIA UNDERGROUND STORAGE TANK LAW	490-69e
<input type="checkbox"/> STATE WATER RESOURCES CONTROL BOARD (SWRCB) PUBLICATION: "HANDBOOK FOR TANK OWNERS - MANUAL AND STATISTICAL INVENTORY RECONCILIATION"	490-69f
<input type="checkbox"/> SWRCB PUBLICATION: "UNDERSTANDING AUTOMATIC TANK GAUGING SYSTEMS"	490-69g
<input type="checkbox"/> OTHER (Specify):	490-69h, 490-69i
<input type="checkbox"/> This facility has a "Designated UST Operator" who has passed the California UST System Operator Exam administered by the International Code Council (ICC). The "Designated UST Operator" will train facility employees in the proper operation and maintenance of the UST systems annually, and within 30 days of hire. This training will include, but is not limited to, the following:	
➤ Operation of the UST systems in a manner consistent with the facility's best management practices	490-70
➤ The facility employee's role with regard to the monitoring equipment as specified in this UST Monitoring Plan	
➤ The facility employee's role with regard to spills and overfills as specified in the UST Response Plan	
➤ Names of contact person(s) for emergencies and monitoring alarms	

X. COMMENTS/ADDITIONAL INFORMATION

Provide additional comments here or indicate how many pages with additional information on specific monitoring procedures are attached to this plan. 490-71

XI. PERSONNEL RESPONSIBILITIES

The UST Owner/Operator is responsible for ensuring that: 1) the daily/routine UST monitoring activities and maintenance of UST leak detection equipment covered by this plan occurs, 2) all conditions that indicate a possible release are investigated, and 3) all monitoring records are maintained properly.

The following person(s) are responsible for performing the monitoring and equipment maintenance:

NAME 490-72	TITLE 490-73
NAME 490-74	TITLE 490-75

The Designated Operator shall perform a monthly visual inspection of the facility, provide a report to the owner/operator, and inform the owner/operator of any conditions that need follow-up action.

XII. OWNER/OPERATOR SIGNATURE

CERTIFICATION: I certify that the information provided herein is true and accurate to the best of my knowledge.

APPLICANT SIGNATURE 490-76	DATE: _____ 490-77
REPRESENTING: <input type="checkbox"/> 1. Tank Owner/Operator <input type="checkbox"/> 2. Facility Owner/Operator <input type="checkbox"/> 3. Authorized Representative of Owner	
APPLICANT NAME (print): 490-78	APPLICANT TITLE: 490-79

Local Agency Signature: _____ Date: ____/____/____

Comments or Special Conditions:

UST Monitoring Plan – Page 2 Instructions

Complete a separate UST Monitoring Plan for each UST monitoring system at the facility. This Monitoring Plan must be kept at the UST location at all times. The elements of this Monitoring Plan constitute conditions of the UST Operating Permit. This form must be submitted with your initial UST Operating Permit Application and within 30 days of changes in the information it contains. Please note that you are required to obtain approval prior to installing or modifying monitoring equipment. (Note: Numbering of these instructions follows the data element numbers on the form.)

- 490-54a. MONITORING OF THE UNDER DISPENSER CONTAINMENT – Indicate the method used for UDC monitoring.
 490-54b. SPECIFY – If 99 “Other” is checked, describe other method used.
 If VI-1-1, VI-1-2 or VI-1-3 or VI-1-99 is checked, complete 490-55 to 490-64b.
- 490-55. PANEL MANUFACTURER – Enter the name of the manufacturer of the monitoring system control panel (console). If there is no control panel (e.g., only an electrical relay box is installed) leave this space blank.
 490-56. MODEL # – Enter the model number for the monitoring system control panel (console). If there is no control panel (e.g., only an electrical relay box is installed) leave this space blank.
 490-57. LEAK SENSOR MANUFACTURER – Enter the name of the manufacturer of the sensor(s).
 490-58. MODEL #(S) – Enter the model number of the sensor(s) installed. If additional space is needed, use Section X.
 490-59. DETECTION OF A LEAK INTO THE UDC TRIGGERS AUDIBLE AND VISUAL ALARMS – Indicate Yes or No
 490-60. UDC LEAK ALARM TRIGGERS PUMP SHUTDOWN – Indicate Yes or No
 490-61. FAILURE/DISCONNECTION OF UDC MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN – Indicate Yes or No
 490-62. UDC MONITORING STOPS THE FLOW OF PRODUCT AT THE DISPENSER – Indicate Yes or No.
 490-63. UDC CONSTRUCTION – Indicate if the construction of the UDC is single-walled, or double-walled.
 490-64a. DOUBLE-WALLED INTERSTITIAL SPACE MONITORING – Indicate what is used to monitor the interstitial space.
 490-64b. LEAK WITHIN THE SECONDARY CONTAINMENT OF UDC TRIGGERS AUDIBLE AND VISUAL ALARMS – Indicate Yes or No
 490-65. VII-1 ELD TESTING – Check the box if you have been notified by the State Water Resources Control Board (SWRCB) that the UST(s) covered by this plan is/are subject to Enhanced Leak Detection Requirements (i.e., UST has any single-wall component and is located within 1,000 feet of a public drinking water well).
 490-66. TESTING OF SECONDARY CONTAINMENT COMPONENTS EVERY 36 MONTHS - Check the box if you have secondary containment that requires testing.
 490-67. SPILL BUCKET TESTING - Check the box if you have spill buckets.
 490-68a-h. VIII RECORDKEEPING – Indicate which monitoring and equipment maintenance records are maintained for this facility.
 490-69a. IX TRAINING STATEMENT – Check the box to verify that the statement is true.
 REFERENCE DOCUMENTS MAINTAINED AT FACILITY – Check the appropriate boxes to describe reference documents maintained at the facility.
 Note that the first two items on the list must be kept at the facility.
 490-69b. MONITORING PLAN – Indicate that this plan is kept as a reference document.
 490-69c. OPERATING MANUALS FOR ELECTRONIC EQUIPMENT – Indicate that this plan is kept as a reference document.
 490-69d. CA UST REGULATIONS – Indicate that this is kept as a reference document.
 490-69e. CA UST LAW – Indicate that this is kept as a reference document.
 490-69f. STATE WATER RESOURCES CONTROL BOARD (SWRCB) PUBLICATION – “HANDBOOK FOR TANK OWNERS - MANUAL AND STATISTICAL INVENTORY RECONCILIATION – Indicate that this is kept as a reference document.
 490-69g. SWRCB PUBLICATION: “UNDERSTANDING AUTOMATIC TANK GAUGING SYSTEMS” – Indicate that this is kept as a reference document.
 490-69h. OTHER – Indicate that other reference documents are kept.
 490-69i. SPECIFY-If “OTHER” is checked, enter a brief description of the other document(s) maintained at the facility. If additional space is needed, see Section X.
 490-70. DESIGNATED OPERATOR TRAINING – Check this box to verify that this statement is true.
 490-71. COMMENTS/ADDITIONAL INFORMATION – Make additional comments or you may attach and identify the number of additional pages of information to describe any additional UST system monitoring-related information (e.g., additional information required by your local agency). Attach any monitoring logs that you will be using for the monitoring of your tank system.
 490-72. NAME – Enter the name of the person who routinely conducts the monitoring and equipment maintenance under this plan.
 490-73. TITLE – Enter the title of the person.
 490-74. NAME – Enter the name of the second person, if applicable, who routinely conducts the monitoring and equipment maintenance under this plan.
 490-75. TITLE – Enter the title of the second person.
- OWNER/OPERATOR SIGNATURE – The tank owner/operator, facility owner/operator, or an authorized representative of the owner shall sign in the space provided. This signature certifies that the signer believes that all information submitted is true, accurate, and complete, and that the training program specified in Section IX has been implemented.
- 490-76. REPRESENTING – Check the appropriate box to indicate whether the signer is the UST owner/operator, the UST facility owner/operator, or an authorized representative of the owner.
 490-77. DATE – Enter the date the plan was signed.
 490-78. APPLICANT NAME – Print or type the name of the person signing the plan.
 490-79. APPLICANT TITLE – Enter the title of the person signing the plan.



COUNTY OF SAN DIEGO CUPA
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
P.O. BOX 129261, SAN DIEGO, CA 92112-9261
(858) 505-6880 FAX (858) 505-6848
<http://www.sdcdeh.org>
UNDERGROUND STORAGE TANK
RESPONSE PLAN – PAGE 1

(One form per facility)

TYPE OF ACTION ☐ 1. NEW PLAN ☐ 2. CHANGE OF INFORMATION

R01

I. FACILITY INFORMATION

FACILITY ID # (Agency Use Only)

3 7 — 0 0 0 —

1

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As)

R02

BUSINESS SITE ADDRESS

R03

CITY

R04

CA

ZIP CODE

R05

II. SPILL CONTROL AND CLEANUP METHODS

This plan addresses unauthorized releases from UST systems and supplements the emergency response plans and procedures in the facility's Hazardous Materials Business Plan.

- If safe to do so, facility personnel will take immediate measures to control or stop any release (e.g., activate pump shut-off, etc.) and, if necessary, safely remove remaining hazardous material from the UST system.
- Any release to secondary containment will be pumped or otherwise removed within 24 hours of discovery. Recovered hazardous materials, unless suitable for their intended use, will be managed as hazardous waste.
- Absorbent material will be used to contain and clean up manageable spills of hazardous materials. Absorbent material which has become too saturated to be effective or which is no longer intended for use will be managed as hazardous waste unless a waste determination in accordance with 22 CCR §66262.11 finds that it is non-hazardous. Used absorbent material, reusable or waste, will be stored in a properly labeled and sealed container. Waste material shall be disposed appropriately.
- Facility personnel will determine whether any water removed from secondary containment systems, or from clean-up activity, has been in contact with any hazardous material. If the water is contaminated, it will be managed as hazardous waste unless a waste determination in accordance with 22 CCR §66262.11 finds that it is non-hazardous. If the water has a petroleum sheen (i.e., rainbow colors), it is contaminated. A thick floating petroleum layer may not necessarily display rainbow colors. Water (hazardous or non-hazardous) from sumps, spill containers, etc. will not be disposed to storm water systems.
- We will review secondary containment systems for possible deterioration if any of the following conditions occur:
 1. Hazardous material in contact with secondary containment is not compatible with the material used for secondary containment;
 2. Secondary containment is prone to damage from any equipment used to remove or clean up hazardous material collected in secondary containment;
 3. Hazardous material, other than the product/waste stored in the primary containment system, is placed inside secondary containment to treat or neutralize released product/waste, and the added material or resulting material from such a combination is not compatible with secondary containment.

III. SPILL CONTROL AND CLEAN-UP EQUIPMENT

PERIODIC MAINTENANCE: Spill control and clean-up equipment kept permanently on-site is listed in the facility's Hazardous Materials Business Plan. This equipment is inspected at least monthly, and after each use, supplies are replenished as needed. Defective equipment is repaired or replaced as necessary.

EQUIPMENT NOT PERMANENTLY ON-SITE, BUT AVAILABLE FOR USE IF NEEDED: (Complete only if applicable)

EQUIPMENT	LOCATION	AVAILABILITY
R10	R20	R30
R11	R21	R31
R12	R22	R32
R13	R23	R33
R14	R24	R34
R15	R25	R35

IV. RESPONSIBLE PERSONS

THE FOLLOWING PERSON(S) IS/ARE RESPONSIBLE FOR AUTHORIZING ANY WORK NECESSARY UNDER THIS RESPONSE PLAN:

NAME	R40	TITLE	R50
NAME	R41	TITLE	R51
NAME	R42	TITLE	R52
NAME	R43	TITLE	R53

V. MONITORING INDICATORS

IF MONITORING INDICATES A POSSIBLE UNAUTHORIZED RELEASE, STEPS TO VERIFY THE RELEASE WILL BE MADE AS FOLLOWS:

R60

☐ Additional system testing or data collection ☐ Inspection by qualified persons ☐ Recalibration of equipment ☐ Other (specify):

UST Response Plan – Instructions

Complete one UST Response Plan for each UST facility. This form must be submitted with your initial UST Operating Permit Application and within 30 days of changes in the information it contains. It supplements the Emergency Response Plans and Procedures in the facility's Hazardous Materials Business Plan. (Note: Numbering of these instructions follows the data element numbers on the form.)

R01. TYPE OF ACTION – Check the appropriate box to indicate why this plan is being submitted.

1. FACILITY ID NUMBER – This space is for agency use only and is the same as UPF (Unified Program Facility) Permit #.

R02. BUSINESS NAME – Enter the complete Facility Name.

R03. BUSINESS SITE ADDRESS – Enter the street address where the facility is located, including building number, if applicable. Post office box numbers are not acceptable. This information must provide a means to locate the facility geographically.

R04. CITY – Enter the city or unincorporated area in which the facility is located.

R05. ZIP CODE – Enter the zip code of business site. The zip + 4 may also be added.

R10. EQUIPMENT – If you have spill control or clean-up equipment kept off-site, list that equipment in sections R10 through R15. If no equipment is kept off-site, leave this section blank.

R20. LOCATION – If you have spill control or clean-up equipment kept off-site, list the equipment location(s) sections R20 through R25. If no equipment is kept off-site, leave this section blank.

R30. AVAILABILITY – If you have spill control or clean-up equipment kept off-site, list the equipment availability in sections R30 through R35. If no equipment is kept off-site, leave this section blank.

R40. NAME – At least one person responsible for authorizing any work necessary under this UST Response Plan must be identified. Use sections R40 through R43 to list the name(s) of the responsible person(s).

R50. TITLE – At least one person responsible for authorizing any work necessary under this UST Response Plan must be identified. Use sections R50 through R53 to list the job title(s) of the responsible person(s).

R60. MONITORING INDICATORS Briefly describe the steps that will be taken to verify the presence or absence of a release if the tank monitoring system indicates the possibility of a release.

OWNER/OPERATOR SIGNATURE – The owner/operator shall sign in the space provided. This signature certifies that the signer believes that all information submitted is true, accurate, and complete.

R70. DATE – Enter the date the plan was signed.

R71. OWNER/OPERATOR NAME – Print or type the name of the person signing the plan.

R72. OWNER/OPERATOR TITLE – Enter the title of the person signing the plan.



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VI. REPORTING AND RECORD KEEPING

We will report/record any overflow, spill, or unauthorized release from a UST system as indicated in this plan.

Recordable Releases: Any unauthorized release from primary containment which the UST operator is able to clean up within eight (8) hours after the release was detected or should reasonably have been detected, and which does not escape from secondary containment, does not increase the hazard of fire or explosion, and does not cause any deterioration of secondary containment, must be recorded in the facility's monitoring records. Monitoring records must include:

- The UST operator's name and telephone number;
- A list of the types, quantities, and concentrations of hazardous substances released;
- A description of the actions taken to control and clean up the release;
- The method and location of disposal of the released hazardous substances, and whether a hazardous waste manifest was or will be used;
- A description of actions taken to repair the UST and to prevent future releases;
- A description of the method used to reactivate interstitial monitoring after replacement or repair of primary containment.

Reportable Releases: Any overflow, spill, or unauthorized release which escapes from secondary containment (or primary containment if no secondary containment exists), increases the hazard of fire or explosion, or causes any deterioration of secondary containment, is a reportable release. Reportable releases are also recordable.

Within 24 hours after a reportable release has been detected, or should have been detected, we will notify the local agency administering the UST program of the release, investigate the release, and take immediate measures to stop the release. If necessary, or if required by the local agency, remaining stored product/waste will be removed from the UST to prevent further releases or facilitate corrective action. If an emergency exists, we will notify the State Office of Emergency Services.

Within five (5) working days of a reportable release, we will submit to the local agency a full written report containing all of the following information to the extent that the information is known at the time of filing the report:

- The UST owner's or operator's name and telephone number;
- A list of the types, quantities, and concentrations of hazardous materials released;
- The approximate date of the release;
- The date on which the release was discovered;
- The date on which the release was stopped;
- A description of actions taken to control and/or stop the release;
- A description of corrective and remedial actions, including investigations which were undertaken and will be conducted to determine the nature and extent of soil, ground water or surface water contamination due to the release;
- The method(s) of cleanup implemented to date, proposed cleanup actions, and a schedule for implementing the proposed actions;
- The method(s) and location(s) of disposal of released hazardous materials and any contaminated soils, groundwater, or surface water.
- Copies of any hazardous waste manifests used for off-site transport of hazardous wastes associated with clean-up activity;
- A description of proposed methods for any repair or replacement of UST system primary/secondary containment systems;
- A description of additional actions taken to prevent future releases.

We will follow the reporting procedures described above if any of the following conditions occur:

- A recordable unauthorized release can not be cleaned up or is still under investigation within eight (8) hours of detection;
- Released hazardous substances are discovered at the UST site or in the surrounding area;
- Unusual operating conditions are observed, including erratic behavior of product dispensing equipment, sudden loss of product, or the unexplained presence of water in the tank, unless system equipment is found to be defective and is immediately repaired or replaced, and no leak has occurred;
- Monitoring results from UST system monitoring equipment/methods indicate that a release may have occurred, unless the monitoring equipment is found to be defective and is immediately repaired, recalibrated, or replaced, and additional monitoring does not confirm the initial results.

Record Retention: Monitoring records and written reports of unauthorized releases must be maintained on-site for at least 3 years. Hazardous waste shipping/disposal records (e.g., manifests) must be maintained for at least 3 years from the date of shipment.

VII. OWNER/OPERATOR SIGNATURE

CERTIFICATION: I certify that the information provided herein is true and accurate to the best of my knowledge.

OWNER/OPERATOR SIGNATURE

DATE

R70

OWNER/OPERATOR NAME (print)

R71

OWNER/OPERATOR TITLE

R72

(Agency Use Only)

This plan has been reviewed and is:

☐ Approved

☐ Approved With Conditions*

☐ Disapproved

Local Agency Signature:

Date: ____/____/____

*Conditions of approval (if any):

UST MONITORING PLOT PLAN
UNDERGROUND STORAGE TANK (UST) MONITORING PROGRAM

Site Name: _____ Facility#/UPF Permit #: _____

Site Address: _____

Date map was drawn or revised: ____/____/____

Instructions

On your site monitoring plot plan, show the general layout of tanks and piping in relation to nearby buildings or other structures. Clearly identify locations of the following equipment, if installed: monitoring system control panels; sensors monitoring tank annular spaces, sumps, trench systems, under-dispenser containment, spill containers, or other secondary containment areas; mechanical or electronic line leak detectors; and in-tank liquid level probes (if used for leak detection). In the space provided, note the date this Site Plan was prepared.